

# Get Ready, Get Set, **GET YOUR COLON ROLLIN'**

## Second Annual Colon Cancer Awareness 5K Run/Walk

### JUNE 7, 2014

### Bailey Park in Battle Creek

#### Race Day Events

7:00 am Registration/Packet pick-up  
9:00am 5K Run/Walk Starts  
10:00am Awards Available

#### Race Information

Fees \$25 if registered on or before 5/25/14 after that registration is \$30 (non-refundable)  
Course 5K Run/Walk on the Linear Park Path  
Awards 1<sup>st</sup> Place Male and Female Overall  
Male and Female Masters Winner (40+)  
1<sup>st</sup>, 2<sup>nd</sup>, & 3<sup>rd</sup> place in each division  
Divisions Under 19 20-29 30-39 40-49 50+



T-shirts are guaranteed to everyone that registers by May 25<sup>th</sup>. No-shows will not receive a T-shirt and will be distributed to race day registrants following the race on a first come-first served basis. Day of race, registration starts at 7:00am and will end promptly at 8:45am. (This is necessary for an on-time start.)

#### Our Mission

The Calhoun County Cancer Control Coalition (5C) is a group of individuals and organizations working together to reduce the cancer burden in Calhoun County through community collaboration. Join us in our efforts to spread the word about getting screened for colorectal cancer.

Registration can conveniently be done online at [www.calhouncancer.org](http://www.calhouncancer.org)

Or mail completed entry form and payment to: PO Box 413 Battle Creek, MI 49016

Please make check payable to: Substance Abuse Council and reference Calhoun County Cancer Control Coalition

---

#### REGISTRATION FORM

(Please Print)

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Age On Race Day \_\_\_\_\_

(Please circle)

Gender: Male / Female

Registering for: 5K Run Or 5K Walk

Shirt Size: S M L XL XXL



I, the undersigned, know that a road race is a potentially hazardous activity. I should not enter to run or walk unless I am medically able. I agree to abide by any decision of a race official relative to my ability to safely complete the run or walk. I assume all risks associated with this event, including but not limited to falls, contact with other participants, and effects of weather, traffic and condition of the course. Being aware of all associated risks, I hereby wave and release the Calhoun County Cancer Control Coalition (5C), their representatives and successors for all claims and liabilities of any kind arising out of my participation with this event. I grant my permission to use any photographs or any other records for this event for any legitimate purpose.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(Parent signature if participant is a minor)

